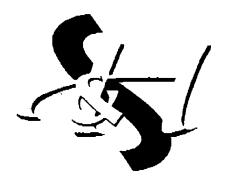
Smith&Hopen,P.A.

Ø1001/027

NOV 2 4 2004



## smith & hopen, p.a.

15950 Bay Vista Drive, Suite 220 Clearwater, Florida 33760 727.507.8558 Tel 727.507.8668 Fax www.baypatents.com

# Fax

### INTELLECTUAL PROPERTY LAW

□ Urgent					
	☑ For Review	☐ Please Com	ment	☐ Please Reply	☐ Please Recycle
Re; US	SSN: 09/763,419		CC:	University of South	Florida
Phone: (5)	71) 272-1265		Date:	November 24, 200	04
Fax: (70	03) 872-9310		Pages:	27 including co	oversheet
Attn: Ar	Arlen Soderquist - ARt Unit 1743			1372.220.PRCWO	us
To: U.	S. Patent & Tradem	ark Office	From:	Ronald E. Smith	

Dear Examiner Soderquist:

In response to the non-final office action mailed on May 26, 2004, we enclose the following:

- Amendment Transmittal with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated November 24, 2004 (2 pages);
- Petition and Fee for Extension of Time with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated November 24, 2004 (2 pages);
- Copy of an article entitled "Eighteenth International Symposium on Capillary Chromatography" (10 pages);
- 4) Credit Card Payment Form PTO-2038 in the amount of \$490.00 (1 page); and
- 5) Amendment A after RCE with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated November 24, 2004 (11 pages).

Very respectfully,

Ronald E. Smith Reg. No. 28,761

The documentation accompanying this transmission contains information from the Law Office of Smith & Hopen, P.A., which is confidential and/or privileged. The information is intended only for the use of the Individual or entity named on this sheet. If you are <u>not</u> the intended recipient, you are hereby notified that any disclosure, copying, distribution, or the taking of any action in reliance upon the contents of this telecopied information is strictly prohibited. If you have received this transmission in error, please notify us by telephone immediately, so that we can arrange for the return of the original documents to us at no cost to you.

NOV 2 4 2004

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.

: 09/763,419

Confirmation No.: 6244

Applicant:

: Abdul Malik : 07/19/2001

Filed: Art Unit

: 1743

Examiner

: Arlen Soderquist

Docket No.

: 1372.220.PRCWOUS

Customer No.

: 21901

For

: Capillary Column and Method of Making

Faxed to Technology Center 1700 at (703) 872-9310 Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

#### **STATUS**

2. Applicant is an independent inventor. A statement was already filed.

#### **EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that an extension of term is required. A Petition and Fee for Extension of Time is attached hereto.

#### CERTIFICATE OF FACSIMILE TRANSMISSION

(37 C.F.R. 1.8 (a))

I HEREBY CERTIFY that this Amendment A, including Amendments to the Claims, and Remarks, is being transmitted by facsimile to the United States Patent and Trademark Office, Art Unit 1743, Attn: Arlen Soderquist, (703) 872-9310 on November 24, 2004.

Dated: November 24, 2004

Shelley Buty

(Amendment Transmittal-page 1)

#### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col.1)			(Col. 2)	(Col. 3)	SMALL ENTIT	. <u>'Y</u>		
Claims Remaining After Amendment			Highest No. Previously Paid For	Present Extra	Addit. Rate Fee			
Total	19	Minus	20	= 0	x \$9 =	\$0		
Indep.	3	Minus	3	= 0	x \$43 =	\$0	_	
First Presentation of Multiple Dependent Claim					+ \$145 =	\$0		
	·				Total Addit. Fee	\$0		

If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3,

No additional fee for claims is required.

Very respectfully,

SIGNATURE OF PRACTITIONER

Reg. No. 28,761

Tel. No.: (727) 507-8558

Ronald E. Smith Smith & Hopen, P.A. 15950 Bay Vista Drive, Ste. 220

Clearwater, FL 33760

(Amendment Transmittal-page 2)

<sup>••</sup> If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".

If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.

09/763,419

Confirmation No. 6244

Applicant

Abdul Malik

Filed:

07/19/2001

TC/A.U.

1743

Examiner

Arlen Soderquist

Docket No.

1372.220.PRCWOUS

Customer No.:

21,901

For

Capillary Column and Method of Making

Faxed to Technology Center 1700 at (703) 872-9310 Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the nonfinal Examiner's Action mailed May 26, 2004, having a shortened statutory period for response set to expired August 26, 2004, and an extended statutory period for response set to expire November 26, 2004, the above-identified patent application is amended a first time as follows:

## AMENDMENT A AFTER RCE (37 C.F.R. § 1.111)

Amendments to the claims begin on page 2 of this paper.

Remarks begin on page 7 of this paper.